LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3 (Sec. 67-6619)

Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

3:08

(Type or print clearly in black ink) See Instructions at bottom of page					DALIATA								
Lobbyi	n's name and p	ennanent busio				D	ate pre	spared		Perio	COVER	4	
Maurice O. Ellsworth									ĺ	month ending			
P.O. Box 668					May 4, 2006						_		
Boise	e, Idaho 8	3701								(M	1	(Day)	(Yr.)
						L				0-	١.	30	2006
Item 1	Totals	of all reportal	de expenditures made or	incurred b	y Lobby	yist o	r by I	.obbyist's Empk	yer on	behalf of Lob	byist's	Employ	yer.
Reimburs	tegory of Ex	ing and Travel	* Total Amount for	Proportion Item 3, at				uted by each empl	loyer (Id	entify employ	275, DB C	er	
De	Not Have to b	Abying Activity • Reported	All Employers	Emplo	yer No.	L	En	nployer No. 2	Emp	loyer No. 3	E	mploye	r No. 4
	inment nd Refreshn	nent	\$ 0.00	s	0.0	00	\$_	0.00	s _		s_		
Living	Accommod	ations	0.00		0.0	90	_	0.00					
Adver	dsing		0.00		0.0	00		0.00			_		
Travel			0.00		0.0	00	_	0.00			_		
Teleph	one .		0.00		0.0	00_	_	0.00			_		
Other !	Expenses or	Services	0.00		0.0	00	_	0.00			_		
	٠.	Total	\$0.00	s	0.0	90	\$_	0.00	s	0.00	s _		0.00
•	When the man	iber of employer	s you are reporting for requ	ires multiple	L-3 form	ns 10-	> file:	d a total amount fo	r all camp	loyers should t	e entere	d on Pag	ge L.
Hen		of each expend	liture of more than fifty	dollars (\$5			_				NE	6	
	Detc .		Place		An	OUNT	╧	Names	A Legisti	nțors & Public (Ancies	in Crou	<u> </u>
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_	د	attached page(s)			ŀ		1						
	CONCEDES ON					Ite	-	En	nployer() Name(s) and	Address	;(cs)	
		INST	TRUCTIONS			H						.	
	o should M 6617 Idaho		ny lobbyist registered t	under Secti	оп	No.1		worth Enterp). Box 158; C		Idaho 833	20		
٠,٠	OUT / EURINO							na Do-t- D-		la Annadis	lon		
		: Monthly re ities of the pas	ports due within ten (10 A month.	D) days of t	the	No.7		ass Roots Ra D. Box 3310;				0	
- m	BE FILED	WITU.											
"	DE FILED	1	Ben Yaura			No3	1	•					
		PC	retary of State DBox 83720										
	-	Bolse.	ID 83720-0080	2202		No.4	•						
	L DO	xne: (206) 334	-2852 Fax: (208) 334-7	LK04									

			byist or by the lobbyist's e later, or for or on behalf of	imployer in the nature of contributions (fany legislator.	of money or other tangible or intengi					
	Date	Атопри		Name of Legislator Raceiving or Benefited						
item Su	Date bject resiler Mount Bill, Lobbyist v a Bill, R Legislat	none af proposed legislar	ion, the number of the Sennie r legistative activity in which pposing.	Name of Legislator Racelving	Cede Subject 17 Health service, medicine, drugs and controlled substances, healt insurance, health service, medicine, drugs and controlled substances, healt insurance, beguing the substances of the substances of the substance o					
				08 Education 09 Elections, campeigns, voting, political parties 10 Equal rights, civil rights, minority affairs 11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, fands 12 Government, county 13 Government, fideral 14 Government, municipal 15 Government, spacial districts 16 Government, state	25 Ministructuring, distribution and services 26 Natural resources, forest and forust products, fisheries, mining and misting products 27 Public lands, peries, recreation 28 Social language, unemployment insurance, public sessistance, workmon's compensation 29 Transportation, highways, streets and reads 30 Utilides, communications, televisions, radio, newspaper, power, CATV, gas 31 Other (please specify)					
ERTIFICA OTTOCK STANS	ment in acc	maky cartify that the orderes with Septice	p above is a true, complete and of 7-6624 Idnibe Code.							